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(9) This examination could be made more economically, more efficiently, and more rapidly at a central laboratory than at the separate concentration camps. The specimens could be collected at the camps and sent by parcel post, under proper precautions, to the central laboratory. This plan is evidently not free from objection from certain administrative points of view, but if adopted it would save the duplication of equipment and unnecessary training of many assistants and it would make for uniform examination.

10. As a preliminary and tentative estimate, subject to revision if necessary, it may be said that the examinations suggested would cost somewhere between 20 cents (possibly 15 cents) and 30 cents (possibly 40 cents) each. Certain factors in the expense can not, however, be definitely foreseen at present.

11. The writer's experience indicates that girls are better for this work than men, but existing circumstances make it more feasible to train men enlisted in the hospital corps to make the examinations. It takes about 1 to 3 weeks to train a person to be trustworthy in the examination. The best results are obtained if the microscopist does not have to work more than half a day at a time.

12. It would be wise to begin promptly with all units at present organized.

13. While the hookworm and *Strongyloides* examinations are the most important ones involved, the other parasites should be considered. Accordingly, the examination of recruits from the warmer portions of the country is at present more pressing than the examination of men from colder localities. The question of extending the inspection to all recruits is, however, an important one to be considered and it would be wise to extend it if time permit.

14. It seems highly probable that, even leaving out of consideration the money value of increased efficiency, the entire expenditure involved in the examination would be saved in the reduced pension roll.

15. It would be well to consider the question whether it would not be wise to combine the examination with a newspaper campaign to induce prospective recruits to take the initiative to have themselves examined and treated.

MALARIA IN EASTERN TEXAS.

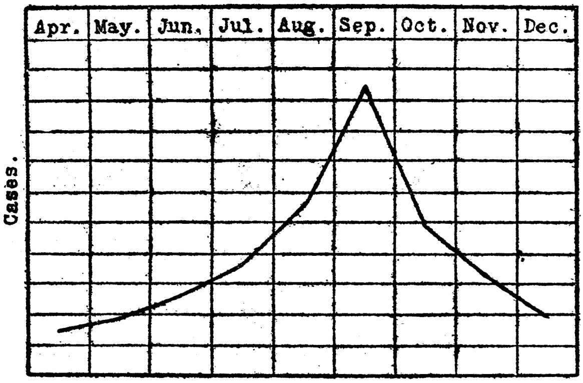
PREVALENCE AND GEOGRAPHIC DISTRIBUTION.

The periodical circularization of the physicians of eastern Texas to determine the prevalence and geographic distribution of malarial infection in the eastern part of the State was carried on during the last nine months of 1915, and the first, second, and fourth quarters of

1916. At regular intervals reply postal cards were sent to the practicing physicians. These cards were sent out quarterly.[1] A reproduction of the card used during 1915 and 1916 will be found on page 1128 of the Public Health Reports of the issue of July 20, 1917.

Of the cards sent to physicians an average of less than 14 per cent were returned. Those returning the cards with the requested data filled in undoubtedly constituted the better class of practitioners, those who understood most clearly what was wanted and the value of the work. The number of cards sent out, the number of schedules returned, and the counties represented at each circularization are shown in Table No. 1.

It is to be borne in mind that the number of cases reported by the physicians by no means shows the number of cases that occurred, for an average of less than 14 per cent of the physicians returned the schedules.



Relative prevalence of malaria in eastern Texas, by months, as indicated by the numbers of cases reported.

The return of the schedules by the physicians being a matter of voluntary cooperation, the data are undoubtedly reliable to an unusual degree as regards the experience of the physicians who cooperated and the number of cases seen by them. It is to be borne in mind, however, that the cases reported represent only those occurring in the practices of the physicians who cooperated. The total number of cases of malaria occurring in the practices of all the physicians of the State must have been many times greater, also the number of cases that occurred in which no physician was in attendance or consulted was probably much greater than the number coming under medical care.

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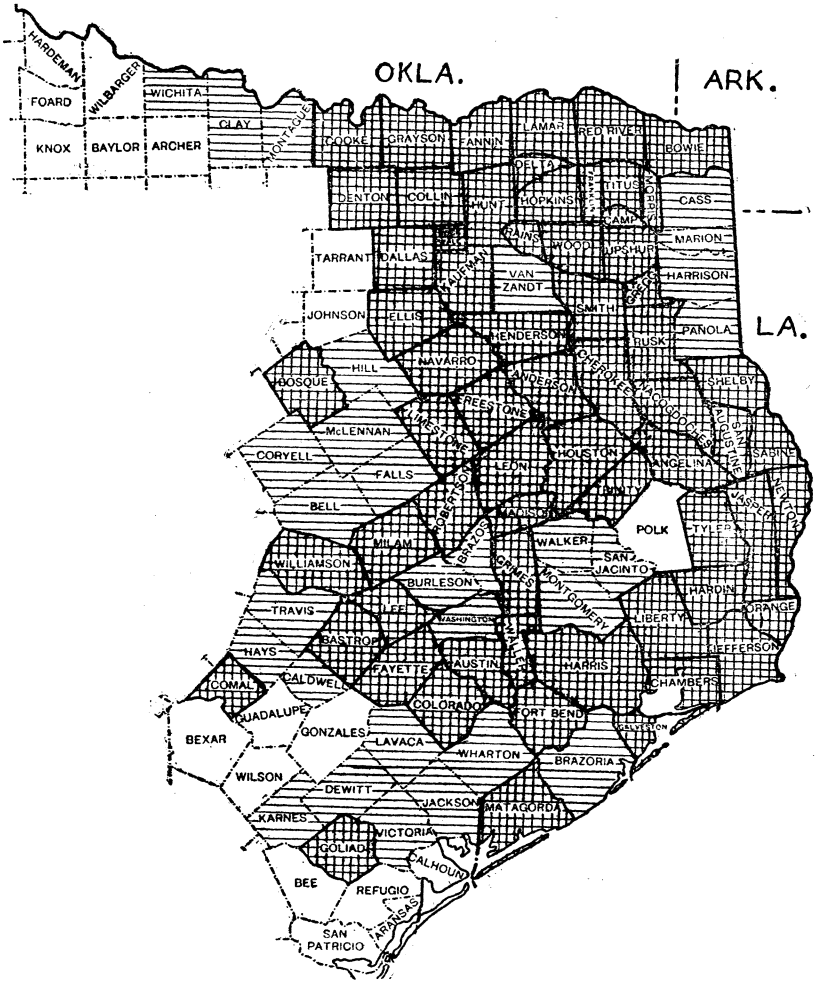
[1] The work of circularization and of compilation of the data on the return cards was carried on by the late Surg. R. H. von Ezdorf up to the time of his death in September, 1916. Since then it has been carried on by Asst. Surg. R. C. Derivaux and Asst. Surg. Gen. H. R. Carter.

The physicians who cooperated were distributed as to locality throughout all sections of the State, so that the data of the occurrence of malaria furnished by them show the geographic distribution of the disease and reasonably accurately its relative prevalence in the various localities.

The cases reported by months are shown in Table No. 2. The relative numbers of cases reported by months are also shown in the chart herewith.



Relative prevalence of malaria in eastern Texas, by counties, in proportion to the population, as indicated by the numbers of cases reported.

The number of cases reported from the several counties are given by race and year in Table No. 3.

The map on page 1303 shows the relative prevalence of the disease in the several counties, the heavier shaded counties being those in which the infection is heaviest, the unshaded counties those in which the infection is lightest, as indicated by the numbers of cases reported. The relative density of infection was determined by ascertaining the number of cases reported in each county during the entire period for which reports were received per 1,000 population. The population used was that of the 1910 census, it being impracticable to estimate populations for the period of the circularization.

By Table No. 4 it will be noted that hemoglobinuric fever was reported in seven counties.

TABLE 1.—*Results of circularization of practicing physicians.*

Period.	Inquiry cards sent to physicians.	Replies received.	Percentage of replies.	Counties represented in replies.	Counties not heard from.	Cases of malaria reported.
1915.						
April to June	3,450	584	16.93	93	17	6,773
July to September	3,450	576	16.70	96	14	21,259
October to December	3,450	492	14.26	92	19	11,576
1916.						
January to March	3,450	450	13.04	91	20	2,445
April to June	3,450	368	10.67	87	23	5,908
October to December	3,500	402	11.49	90	20	3,529

TABLE 2.—*Cases of malaria reported by months.*

Year.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.
1915				1,606	2,161	3,006	4,129	6,455	10,675	5,525	3,771	2,280
1916	748	700	997	1,179	1,752	2,977				1,515	1,233	781

TABLE 3.—*Cases reported by counties, by years, and by color.*

County.	Apr. 1 to Dec. 31, 1915.			Jan. 1 to June 30 and Oct. 1 to Dec. 31, 1916.		
	White.	Colored.	Combined.	White.	Colored.	Combined.
Anderson	236	103	339	106	15	121
Angelina	90		90	52		52
Aransas						
Archer	1		1			
Austin	380	367	747	187	52	239
Bastrop	671	99	770	97	58	155
Baylor	5		5	3	1	4
Bee						
Bell	118		118	57	1	58
Bexar	71	7	78	31	15	46
Bosque	206	10	216	65	2	67
Bowie	384	104	488	137	62	199
Brazoria	38	35	73			
Brazos	100	4	104	25		25
Burleson	22	34	56	19	48	67
Caldwell	12	2	14	14	11	25
Calhoun						
Camp	74	44	118			
Cass	121	28	149	8	4	12
Chambers				56	38	94
Cherokee	259	180	439	6		6
Clay	34	3	37	46	4	50

TABLE 3.—*Cases reported by counties, by years, and by color*—Continued.

County.	Apr. 1 to Dec. 31, 1915.			Jan. 1 to June 30 and Oct. 1 to Dec. 31, 1916.		
	White.	Colored.	Combined.	White.	Colored.	Combined.
Collin	402	60	462	180	11	191
Colorado	87	38	125	21	33	54
Comal	104	6	110	43	8	51
Cooke	204	10	214	14	....	14
Coryell	41	2	43	7	....	7
Dallas	548	113	661	418	56	474
Delta	352	58	410	110	22	132
Denton	301	25	326	138	3	141
De Witt	64	47	111	11	5	16
Eastland	....	....	....	....	....	....
Ellis	350	171	521	255	40	295
Falls	63	37	100	52	37	89
Fannin	233	54	287	46	11	57
Fayette	352	172	524	109	47	156
Foard	....	....	....	13	....	13
Fort Bend	98	126	224	6	18	24
Franklin	....	....	....	64	19	83
Freestone	1,504	217	1,721	266	60	326
Goliad	20	17	37	24	16	40
Gonzales	14	1	15	2	....	2
Grayson	565	106	671	338	24	362
Gregg	149	96	245	173	128	301
Grimes	102	168	270	87	116	203
Guadalupe	....	....	....	....	....	....
Hardeman	11	....	11	3	....	3
Hardin	167	44	211	4	2	6
Harris	1,519	508	2,027	298	29	327
Harrison	38	29	67	22	35	57
Hays	16	1	17	11	10	21
Henderson	169	42	211	550	133	683
Hill	238	49	287	3	....	3
Hopkins	463	181	644	91	45	136
Houston	624	488	1,112	103	71	174
Hunt	614	48	662	152	29	181
Jackson	25	5	30	7	....	7
Jasper	192	71	263	29	25	54
Jefferson	286	414	700	85	9	94
Johnson	28	8	36	11	....	11
Karnes	55	8	63	28	1	29
Kaufman	733	123	856	88	31	119
Kleberg	....	....	....	14	1	15
Knox	12	....	12	....	....	....
Lamar	909	469	1,378	119	44	163
Lavaca	99	20	119	33	1	34
Lee	326	70	396	101	28	129
Leon	1,745	691	2,436	235	177	412
Liberty	110	30	140	325	73	398
Limestone	1,731	282	2,013	28	7	35
McLennan	270	51	321	111	52	163
Madison	1,012	81	1,093	92	14	106
Marion	....	....	....	62	....	62
Matagorda	115	133	248	39	22	61
Milan	343	148	491	82	53	135
Montague	18	....	18	24	....	24
Montgomery	....	....	....	....	....	....
Morris	1,493	800	2,293	90	70	160
Nacogdoches	474	308	782	234	92	326
Navarro	235	56	291	86	45	131
Newton	176	....	176	....	....	....
Orange	168	24	192	....	....	....
Panola	5	1	6	67	49	116
Polk	7	....	7	13	....	13
Rains	....	....	....	100	....	100
Red River	877	210	1,087	209	34	243
Refugio	....	....	....	....	....	....
Robertson	280	337	617	238	66	304
Rockwall	186	59	245	7	3	10
Rusk	754	283	1,037	136	68	204
Sabine	182	22	204	199	19	218
San Augustine	189	28	217	575	26	601
San Jacinto	26	27	53	....	....	....
San Patricio	2	....	2	3	....	3
Shelby	340	10	350	63	20	83
Smith	456	128	584	197	116	313
Tarrant	220	76	296	53	10	63
Titus	372	10	382	51	3	54
Travis	79	5	84	30	19	49

TABLE 3.—*Cases reported by counties, by years, and by color*—Continued.

County.	Apr. 1 to Dec. 31, 1915.			Jan. 1 to June 30 and Oct. 1 to Dec. 31, 1916.		
	White.	Colored.	Combined.	White.	Colored.	Combined.
Trinity	180	215	395	60	24	84
Tyler	179	16	195	54	28	82
Upshur	624	458	1,082	83	30	113
Van Zandt	64	16	80	78	7	85
Victoria	34	4	38	4		4
Walker	26	25	51	14	18	32
Waller	96	119	215			
Washington	112	29	141	6		6
Wharton	6	2	8	25	19	44
Wichita	37	19	56	11	1	12
Wilbarger	9		9			
Williamson	477	57	534	159	78	237
Wilson	37	5	42	2	1	3
Wood	859	217	1,076	190	106	296
Total	29,504	10,104	39,608	9,073	2,809	11,882

TABLE 4.—*Hemoglobinuric fever reported, 1916.*

County.	Period.	Cases.
Denton	First quarter	1
Hopkins	.....do	1
Wood	.....do	2
Delta	Second quarter	2
Henderson	Fourth quarter	5
Morris	.....do	1
Titus	.....do	1

TYPHOID FEVER.

EPIDEMIC AT CHARLESTON, W. VA., APRIL-JUNE, 1917.

By A. W. FREEMAN, Epidemiologist, United States Public Health Service.

During the month of May, 1917, an unusually large number of cases of a fever, diagnosed by the local physicians as typhoid, began to be reported to the health commissioner of the city of Charleston. The dates of report of these cases are given in Table 1.

During the months of May and June, 127 cases were reported, and early in May the matter attracted the attention of the West Virginia State board of health. An investigation was immediately begun by the board. Shortly afterwards request was made of the Surgeon General of the Public Health Service that an investigation be made into the causes of the epidemic. This investigation, of which the following is a report, was begun on the evening of June 16, and completed on the evening of June 26. It was conducted in cooperation with the city and State boards of health, and much of the information used in this report was obtained from these authorities.